

COMMONWEALTH OF MASSACHUSETTS

Middlesex, ss.

Board of Registration in Medicine

Adjudicatory Case No. 2024-042

In the Matter of

ROBYN A. SACHS, M.D.

CONSENT ORDER

Pursuant to G.L. c. 30A, § 10, Robyn A. Sachs, M.D. (Respondent) and the Board of Registration in Medicine (Board) (hereinafter referred to jointly as the “Parties”) agree that the Board may issue this Consent Order to resolve the above-captioned adjudicatory proceeding. The Parties further agree that this Consent Order will have all the force and effect of a Final Decision within the meaning of 801 CMR 1.01(11)(d). The Respondent admits to the findings of fact specified below and agrees that the Board may make the conclusions of law and impose the sanction set forth below in resolution of investigative Docket No. 19-534.

Findings of Fact

1. The Respondent is Board-certified in general surgery. She graduated from the Saba School of Medicine (Dutch Caribbean Island of Saba), in 1997. The Respondent has been licensed to practice medicine in Massachusetts under certificate number 225815 since 2005. She is currently affiliated with Beth Israel Lahey Health Specialty Care Breast Health Center in Plymouth where she specializes in breast surgery.

2. At G.L. c. 4, § 7(26)(c), on G.L. c. 4, § 7(26)(c) 2012, Patient A, who was previously diagnosed with G.L. c. 4, § 7(26)(c), returned to ED with complaints of increased G.L. c. 4, § 7(26)(c) pain associated with G.L. c. 4, § 7(26)(c).

3. The Respondent saw Patient A at [G.L. c. 4, § 7(26)(c)] and admitted her for surgery.
4. At [G.L. c. 4, § 7(26)(c)] Patient A was taken to the operating room where a [G.L. c. 4, § 7(26)(c)]
[G.L. c. 4, § 7(26)(c)] was performed by the Respondent.
5. The operation started at [G.L. c. 4, § 7(26)(c)] as a conventional [G.L. c. 4, § 7(26)(c)] procedure.
6. The Respondent encountered difficulty with visualization and mistakenly cut the [G.L. c. 4, § 7(26)(c)]
[G.L. c. 4, § 7(26)(c)] and mistakenly cut or otherwise injured the [G.L. c. 4, § 7(26)(c)]
[G.L. c. 4, § 7(26)(c)].
7. The Respondent had difficulty keeping the [G.L. c. 4, § 7(26)(c)] insufflated so she decided to convert to an open procedure at [G.L. c. 4, § 7(26)(c)].
8. Once the Respondent opened, she continued to have difficult visualization, so she called one of her partners, who was in the hospital at that time.
9. They did a [G.L. c. 4, § 7(26)(c)], which revealed that the [G.L. c. 4, § 7(26)(c)] had been cut.
10. They transferred Patient A to a tertiary medical center for surgical repair.
11. Patient A was taken to the operating room where an [G.L. c. 4, § 7(26)(c)] [G.L. c. 4, § 7(26)(c)]
[G.L. c. 4, § 7(26)(c)] were performed.
12. The surgeon at the tertiary medical center found that the [G.L. c. 4, § 7(26)(c)] and some [G.L. c. 4, § 7(26)(c)] had been cut, as was the [G.L. c. 4, § 7(26)(c)].
13. The surgeon also noted that the sutures placed by the Respondent were not on the structures that the Respondent thought they were.
14. In 2013, Patient A filed a medical malpractice suit against the Respondent alleging negligent treatment and substandard care in her performance of the surgery on [G.L. c. 4, § 7(26)(c)] 2012.

15. On October 15, 2019, following a five-day trial, the jury entered a verdict in favor of Patient A and against the Respondent and awarded damages in the amount of \$1,250,000.

16. The Respondent did not appeal or otherwise challenge the verdict and judgment entered on October 24, 2019.

Conclusions of Law

A. The Respondent engaged in conduct which places into question the Respondent's competence to practice medicine, including but not limited to gross misconduct in the practice of medicine, or practicing medicine fraudulently, or beyond its authorized scope, or with gross incompetence, or with gross negligence on a particular occasion or negligence on repeated occasions in violation of M.G.L. c. 112 §5, eighth par. (c) and 243 CMR 1.03(5)(a)(3).

B. The Respondent committed malpractice as defined by M.G.L. c. 112, § 61, in that (1) Respondent had a doctor-patient relationship with Patient A, (2) Respondent failed to conform to good medical practice in her treatment of Patient A, and (3) injury to Patient A was caused by the Respondent, in violation of M.G.L. c. 112 §5, eighth par. (c) and 243 CMR 1.03(5)(a)(17).

Sanction and Order

The Respondent's license is hereby REPRIMANDED.

This sanction is imposed for each violation of law listed in the Conclusion section and not a combination of any or all of them.

Execution of this Consent Order

Complaint Counsel and the Respondent agree that the approval of this Consent Order is left to the discretion of the Board. The signature of Complaint Counsel, the Respondent, and the Respondent's counsel are expressly conditioned on the Board accepting this Consent Order. If the Board rejects this Consent Order in whole or in part, then the entire document shall be null


and void; thereafter, neither of the parties nor anyone else may rely on these stipulations in this proceeding.

As to any matter in this Consent Order left to the discretion of the Board, neither the Respondent, nor anyone acting on her behalf, has received any promises or representations regarding the same.


The Respondent waives any right of appeal that she may have resulting from the Board's acceptance of this Consent Order.

The Respondent shall provide a complete copy of this Consent Order with all exhibits and attachments within ten (10) days by certified mail, return receipt requested, or by hand delivery to the following designated entities: any in- or out-of-state hospital, nursing home, clinic, other licensed facility, or municipal, state, or federal facility at which the Respondent practices medicine; any in- or out-of-state health maintenance organization with whom the Respondent has privileges or any other kind of association; any state agency, in- or out-of-state, with which the Respondent has a provider contract; any in- or out-of-state medical employer, whether or not the Respondent practices medicine there; the state licensing boards of all states in which the Respondent has any kind of license to practice medicine; the Drug Enforcement Administration Boston Diversion Group; and the Massachusetts Department of Public Health Drug Control Program. The Respondent shall also provide this notification to any such designated entities with which the Respondent becomes associated within one year following the imposition of the reprimand. The Respondent is further directed to certify to the Board within ten (10) days that the Respondent has complied with this directive.

The Board expressly reserves the authority to independently notify, at any time, any of the entities designated above, or any other affected entity, of any action it has taken.

Robyn Sachs 
Robyn A. Sachs, M.D.
Licensee

06/25/2024 6/25/24
Date



Michael J. Racette, Esq.
Counsel for Licensee

7/8/24
Date


Sheryl M. Bourbeau, Esq.
Complaint Counsel

7/10/2024
Date

So ORDERED by the Board of Registration in Medicine this 15th__ day of August,____
2024_.


Booker T. Bush, M.D.
Board Chair